MULTIPLE DEPENDENT CLAIM FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AS FILED AFTER I AMENDMENT 1 MAMERIMENT AFTER AS FILED AFTER IND. CAMERIDMENT. IND. DEP. IND. DEP. THAMEHOMENT IND. DEP. DEP. IND. DEP. 7 <u>62</u> <u>33</u> TOTAL IND. T A T TOTALDE \$ **∳**□ TOTAL DO ⇜ **∜**¤ CLABOS U.S. DEPARTMENT & COMMERCE